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FACSIMILE TRANSMISSION COVER SHEET

DATE:

January 14, 2004

TO:

Examiner Patricia A. Short

Group Art Unit 1712

Mail Stop AF

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

RE:

U.S. Patent Application No. 09/905,156

For: POLYURETHANES OBTAINED FOM HYDROXYALKANOATES

AND ISOCYANATES Our Ref: 3130-002-02

FROM:

Luke A. Kilyk, Esq. 🞾 🗸

FAC. TEL. NO.:

1-703-872-9306

NUMBER OF PAGES (INCLUDING THIS COVER SHEET): 15

Items Attached: Supplemental Amendment After Final -- 11 pages

Petition for Extension of Time - 1 page

Fee Transmittal -- 1 page

Credit Card Payment Form -- 1 page

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, Fax No. 1-703-872-9306 on January 14, 2004.

Stephanie Hill

Name of Person signing Certificate

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TOTAL AMOUNT OF PAYMENT

PAGE

PTO/SB/17 (10-03) Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2004 Effective 10/01/2003. Potent fees are subject to annual revision.

(\$) 420.00

Complete if Known				
Application Number	09/905,156			
Filing Date	July 13, 2001			
First Named Inventor	WHITEHOUSE et al.			
Examiner Name	Patricia Short			
Art Unit	1712	· "-		
Attorney Docket No.	3130-002-02	***************************************		

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)				
Check X Credit card Order Other None		DDITIO	,			
F 3	Fee	Entity Fee	Small	Fee	Fee Description	Fee Bald
Deposit Account Deposit	Code	(\$)	Code	(\$)	• • • • • • • • • • • • • • • • • • • •	Fee Paid
Account 50-0925 Number	1051	130	2051	65	Surcharge - late filing fee or oath	
Deposit Account Name Kilyk & Bowersox, P.L.L.C.	1052	50	2052	25	Surcharge – late provisional filling tee or cover sheet	
The Director is authorized to: (check all that apply)	1053	130	1053	130	Non-English specification	
Charge fee(s) indicated below X Crodit any overpayments	1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
X Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804	920*	Requesting publication of SIR prior to	
Charge fee(s) indicated below, except for the filling fee	1805	1,840*	1805	1,840*	Examiner action Requesting publication of SIR after Examiner action	
to the above-Identified deposit account.	4	İ	ŀ			
FEE CALCULATION	1251	110	2251	55	Extension for repty within first month	
1. BASIC FILING FEE	1252	420	2252	210	Extension for reply within second month	420.00
Large Entity Small Entity	1253	950	2253	475	Extension for reply within third month	
Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension for reply within fourth month	
1001 770 2001 385 Utility filing fee	1255	2,010	2255	1,005	Extension for reply within fifth month	
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Appeal	
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal	—
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
	1452	110	2452	55	Petition to revive – unavoidable	
SUBTOTAL (1) (\$)	1453	1,330	2453	665	Petition to revive unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665	Utility issue fee (or relssue)	
Fee from Extra Claims below Fee Paid	1502	480	2502	240	Design issue fee	
Total Claims -20**= X =	1503	640	2503	320	Plant issue fee	
Independent . 3**= X =	1480	130	1460	130	Petitions to the Commissioner	
Multiple Dependent	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity	1806	180	1806	180	Submission of Information Disclosure Stmt	
Fee Fee Fee Fee Fee Description Code (\$)	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1202 18 2202 9 Claims in excess of 20	1809	776	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
1201 86 2201 43 Independent claims in excess of 3	1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
1203 290 2203 145 Multiple dependent claim, if not paid	1801	770	2801	385	Request for Continued Examination (RCE)	
1204 86 2204 43 **Reissue independent claims over original patent		900	1802	900	Request for expedited examination of a design application	
1205 18 2205 9 **Reissue claims in excess of 20 and over original patent						
SUBTOTAL (2) (\$)		fee (spec	afy) ,			
or number previously paid, if greater, For Reissues, see above		ed by Bas	ic Filing (Fee Paid	SUBTOTAL (3) (\$) 420.	00

SUBMITTED BY Complete (if applicable) Registration No. Name (Print/Type) Luke A. Kilyk Telephone 33,251 1-540-428-1701 (Attorney/Agent) Signature Date January 14, 2004

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Name (Print)	Signature